



**Massachusetts Department of Environmental Protection**  
*Bureau of Waste Site Cleanup*

**BWSC-012B**

**BILL OF LADING (pursuant to 310 CMR 40.0030)**

Release Tracking Number

**SUMMARY SHEET** \_\_\_\_\_ **OF** \_\_\_\_\_

-

<b>I. LOAD INFORMATION:</b>		Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
<b>Load 1:</b>			
Date of Shipment:	Time of Shipment:	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt: Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
Truck/Tractor Registration:	Trailer Registration (if any):		Load Size (cu. yds./tons):
<b>Load 2:</b>		Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment:	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt: Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
Truck/Tractor Registration:	Trailer Registration (if any):		Load Size (cu. yds./tons):
<b>Load 3:</b>		Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment:	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt: Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
Truck/Tractor Registration:	Trailer Registration (if any):		Load Size (cu. yds./tons):
<b>Load 4:</b>		Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment:	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt: Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
Truck/Tractor Registration:	Trailer Registration (if any):		Load Size (cu. yds./tons):
<b>Load 5:</b>		Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment:	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt: Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
Truck/Tractor Registration:	Trailer Registration (if any):		Load Size (cu. yds./tons):
<b>Load 6:</b>		Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:	Time of Shipment:	<input type="checkbox"/> AM <input type="checkbox"/> PM	Date of Receipt: Time of Receipt: <input type="checkbox"/> AM <input type="checkbox"/> PM
Truck/Tractor Registration:	Trailer Registration (if any):		Load Size (cu. yds./tons):
<b>J. LOG SHEET VOLUME INFORMATION:</b>			
		Total Volume Recorded This Page (cu. yds./tons)	
		Total Carried Forward (cu. yds./tons):	
		Total Carried Forward and This Page (cu. yds./tons):	